

WELL DRILLER'S REPORT

State law requires that this report be filed with the State Board of Water Well Contractors within 30 days after completion or abandonment of the well.

1. WELL OWNER Name <u>Diane Hall</u> Address <u>1950 - 9th Street S.E. HAYES, N.DAK</u>	7. WATER LEVEL Static water level <u>35</u> feet below surface If flowing: closed-in pressure _____ psi GPM flow _____ through _____ inch pipe Controlled by: ☐ Valve ☐ Reducers ☐ Other If other, specify _____																																
2. WELL LOCATION Sketch map location must agree with written location. NORTH 1 MILE County <u>Emmons</u> Sec. (1 mile) _____ <u>1/4</u> <u>12</u> <u>1/4</u> Sec. <u>33</u> Twp. <u>130</u> N. Rg. <u>74</u> W.	8. WELL TEST DATA ☒ Pump ☐ Bailer ☐ Other Pumping level below land surface: <u>105</u> ft. after <u>12</u> hrs. pumping <u>30</u> gpm _____ ft. after _____ hrs. pumping _____ gpm _____ ft. after _____ hrs. pumping _____ gpm																																
3. PROPOSED USE ☒ Domestic ☐ Geothermal ☐ Monitoring ☒ Stock ☐ Irrigation ☐ Industrial ☐ Municipal ☐ Test Hole	9. WELL LOG <table><thead><tr><th rowspan="2">Formation</th><th colspan="2">Depth (ft.)</th></tr><tr><th>From</th><th>To</th></tr></thead><tbody><tr><td>Top Soil</td><td>0</td><td>5</td></tr><tr><td>1/8" low clay</td><td>5</td><td>15</td></tr><tr><td>Blue Clay</td><td>15</td><td>50</td></tr><tr><td>Shale</td><td>50</td><td>1610</td></tr><tr><td>Gravel</td><td>1610</td><td>1620</td></tr><tr><td>Shale</td><td>1620</td><td>2065</td></tr><tr><td>Dakota</td><td>2065</td><td>2240</td></tr><tr><td>Mudstone</td><td>2240</td><td>2390</td></tr><tr><td>SANDSTONE</td><td>2390</td><td>2580</td></tr></tbody></table>	Formation	Depth (ft.)		From	To	Top Soil	0	5	1/8" low clay	5	15	Blue Clay	15	50	Shale	50	1610	Gravel	1610	1620	Shale	1620	2065	Dakota	2065	2240	Mudstone	2240	2390	SANDSTONE	2390	2580
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4. METHOD DRILLED ☐ Cable ☐ Reverse Rotary ☐ Bored ☒ Forward Rotary ☐ Jetted ☐ Auger If other, specify _____																																	
5. WATER QUALITY Was a water sample collected for: Chemical Analysis? ☒ Yes ☐ No Bacteriological Analysis? ☒ Yes ☐ No If so, to what laboratory was it sent? <u>Bismarck, N.D.</u>																																	
6. WELL CONSTRUCTION Diameter of hole <u>8-5</u> inches. Depth <u>2220</u> feet. Casing: ☒ Steel ☐ Plastic ☐ Concrete ☐ Threaded ☐ Welded ☐ Other If other, specify _____ Pipe Weight: Diameter: From: To: <u>4.5</u> lb/ft <u>5</u> inches <u>0</u> feet <u>300</u> feet <u>4.8</u> lb/ft <u>2 1/2</u> inches <u>30</u> feet <u>2520</u> feet _____ lb/ft _____ inches _____ feet _____ feet Was perforated pipe used? ☒ Yes ☐ No Perforated pipe set from <u>2380</u> ft to <u>2520</u> feet Was casing left open end? ☒ Yes ☐ No Was a well screened installed? ☐ Yes ☒ No If so, how _____ Material _____ Diameter _____ inches Slot Size _____ set from _____ feet to _____ feet Slot Size _____ set from _____ feet to _____ feet Was packer or seal used? ☐ Yes ☐ No If so, what material _____ Depth _____ ft. (stainless steel, bronze, etc.) Type of well: Straight screen ☐ Gravel packed ☐ Depth grouted: From <u>0</u> To <u>300</u> Grouting Material: Cement ☒ Other _____ If other explain: _____ Well head completion: Pitless unit ☒ 12" above grade ☒ Other _____ If other, specify _____ Was pump installed: ☒ Yes ☐ No Was well disinfected upon completion? ☐ Yes ☐ No	(Use separate sheet if necessary) 10. DATE COMPLETED <u>11/24/02</u> 11. WAS WELL PLUGGED OR ABANDONED? ☐ Yes ☒ No If so, how _____ 12. REMARKS: 13. DRILLER'S CERTIFICATION This well was drilled under my jurisdiction and this report is true to the best of my knowledge. <u>Diane Hall</u> <u>124</u> Driller's or Firm's Name Certificate No <u>446 Bismarck Ave N.E.</u> Address <u>Hall & Son</u> <u>12/15/02</u> Signed by Date																																